FORM D

RECEIVED

UNITED STATES ECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APP	ROVAL
//B Number:	3235-007

ΟN

May 31, 2002 Expires:

Estimated average burden Hours per response. 16.00

SE	C USE OI	NLY
Prefix		Serial
DAT	E RECEI	VED

UNIFORM LIMIT	ED OFFERING	EXEMPTION		<u>'</u>	
Name of Offering (☐ check if this is an amendment and Series A Preferred	l name has changed, a	nd indicate change.)	11	72139	
Filing Under (Check box(es) that apply):	□ Rule 505	⊠ Rule 506	☐ Section 4(6)	ULOE	
Type of Filing: ⊠ New Filing ☐ Amendment			\$\$; ((\$) \$(\$); \$(\$)\$ (((\$))	י וממוון ממוום וופון פפופן	
	DENTIFICATION I	DATA	[]		
1. Enter the information requested about the issuer Name of Issuer: (check if this is an amendment and name has change	. 1 4 1 1 1		POT 1101 OTO11 DIQUO 11101 10110	1888 18 1888 1888	
Bill Barrett Corporation			02058	429	
Address of Executive Offices (Number and Street, City, St 1099 18th Street, Suite 2300, Denver, CO 80202	ate, Zip Code)	Telephone (303) 293-9	Number (mercomb		
Address of Principal Business Operations (Number and Street, City, State, Z (if different from Executive Offices) Same as above.	Lip Code)	Telephone Same as al	Number (Including bove.	Area Code)	PROCESSEI
Brief Description of Business Natural gas exploration and production.					SEP 2.3 2002
Type of Business Organization ⊠ corporation	formed	other (please specify:)	P	THOMSON
☐ business trust ☐ limited partnership, to be for	ormed			•	-INANCIAL
Actual or Estimated Date of Incorporation or Organization: Month 0 4 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal CN for Canada; FN for othe		☐ Estimated of	The Corporation original during January 2002 and current jurisdiction of De	was later reincorporat	
GENERAL INSTRUCTIONS	- Total Grand Gran				
Federal: Who Must File: All issuers making an offering of securities in reliance on an exe	emption under Regulation	D or Section 4(6), 17 Cl	FR 230.501 et seq. or	15 U.S.C. 7d(6).	
When To File: A notice must be filed no later than 15 days after the first sal Commission (SEC) on the earlier of the date it is received by the SEC at the admailed by United States registered or certified mail to that address.					
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W.	V., Washington, D.C. 2054	19.			
Copies Required: Five (5) copies of this notice must be filed with the SEC, one manually signed copy or bear typed or printed signatures.	e of which must be manua	ally signed. Any copies	not manually signed	must be photocopie	es of the
Information Required: A new filing must contain all information requested information requested in Part C, and any material changes from the information p					
Filing Fee: There is no federal filing fee.					
State: This notice shall be used to indicate reliance on the Uniform Limited Offering adopted this form. Issuers relying on ULOE must file a separate notice with the the payment of a fee as a precondition to the claim for the exemption, a fee in the accordance with state law. The Appendix to the notice constitutes a part of this relationship.	Securities Administrator ne proper amount shall ac	in each state where sales company this form. Thi	are to be, or have bee	en made. If a state	requires
	ATTENTION				
Failure to file notice in the appropriate states will not resappropriate federal notice will not result in a loss of an at the filing of a federal notice.					

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) William J. Barrett Business or Residence Address (Number and Street, City, State, Zip Code) 1099 18th Street, Denver, CO 80202 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Fredrick J. Barrett Business or Residence Address (Number and Street, City, State, Zip Code) 1099 18th Street, Denver, CO 80202 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Arnold L. Chavkin Business or Residence Address (Number and Street, City, State, Zip Code) 1221 Avenue of the Americas, Floor 39, New York, NY 10020 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Henry Cornell (Number and Street, City, State, Zip Code) Business or Residence Address 85 Broad Street, New York, NY 10004 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Jeffrey A. Harris Business or Residence Address (Number and Street, City, State, Zip Code) 466 Lexington Avenue, New York, NY 10017-3147 ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: ☐ Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Roger L. Jarvis Business or Residence Address (Number and Street, City, State, Zip Code) 1200 Smith Street, Suite 800, Houston, TX 77002 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) John F. Keller

(Use blank sheet, or copy and use additional copies of this sheet as necessary.)

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☐ Beneficial Owner ☐ Executive Officer

Director

General and/or Managing Partner

(Number and Street, City, State, Zip Code)

(Number and Street, City, State, Zip Code)

Promoter

Business or Residence Address

Check Box(es) that Apply:

Philippe S.E. Schreiber
Business or Residence Address

1099 18th Street, Denver, CO 80202

Full Name (Last name first, if individual)

26 Sheep Pond Road, Nantucket, MA 02554

			,		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Robert W. Howard	if individual)				
Business or Residence Addr 1099 18th Street, Denver, Co	ress (Number a	nd Street, City, State, Zip	Code)	,	
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Warburg Pincus Private E	,				
Business or Residence Adda 466 Lexington Avenue, Nev			Code)		
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, J.P. Morgan Partners (BHC.	A), L.P.				
Business or Residence Addr 1221 Avenue of the Americ			Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, GS Capital Partners 2000, L	P.				
Business or Residence Addr 85 Broad Street, New York,		nd Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Glenn Doshay					
Business or Residence Addr P.O. Box 675910, Rancho S		nd Street, City, State, Zip 67	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Hennie L.J.M. Gieskes	if individual)				
Business or Residence Addr Dennenlaan 9 A, Wassenaan	,	nd Street, City, State, Zip Netherlands	Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ress (Number a	nd Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		ı		
Business or Residence Addr		nd Street, City, State, Zip blank sheet, or copy and use	additional copies of this she	eet as necessary.)	
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					B. II	NFORMA	TION A	BOUT OI	FERING				Y	es No
1.	Has the issue	er sold, or	does the i	ssuer inte	nd to sell,	to non-acc	redited in	vestors in	this offeri	ng?				
			Answer	also in A	ppendix, (Column 2,	if filing u	nder ULO	E.					
2.	What is the	ninimum	investmen	t that will	be accept	ed from a	ny individ	ual?			•••••			<u>\$N/A</u>
													Y	es No
3.	Does the off	ering pern	nit joint ov	vnership o	f a single	unit?								
4.	Enter the ir commission person to be list the name dealer, you r	or similar listed is a e of the bo nay set for	remuneran n associate oker or de oth the info	tion for so ed person ealer. If to ormation f	olicitation or agent on nore than	of purcha of a broker five (5) p	sers in con or dealer ersons to	nnection v registered	vith sales o with the S	of securition SEC and/o	es in the c r with a st	offering. I	fa es,	
Ful	l Name (Last i	name first	, if individ	ual)										
N/A														
Bus	siness or Resid	ience Add	ress (Num	iber and S	treet, City	, State, Zij	code)							
Na	me of Associa	ted Broke	or Dealer	?										
Sta	tes in Which F	erson Lis	ted Has Sc	olicited or	Intends to	Solicit Pu	ırchasers							
	(Check "All	States" or	check inc	lividual St	ates)		•••••						É	All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] · [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Ful	l Name (Last	name first	, if individ	lual)				,		· · · · · · · · · · · · · · · · · · ·				····
Bu	siness or Resid	lence Add	ress (Num	ber and S	treet, City	, State, Zi	p Code)							· · · · · · · · · · · · · · · · · · ·
Na	me of Associa	ted Broke	r or Dealer	r										
Sta	tes in Which F	erson Lis	ted Has So	olicited or	Intends to	Solicit Pu	irchasers	 					101100	·
	(Check "All	States" or	check inc	lividual Si	ates)		•••••							All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Ful	l Name (Last	name first	, if individ	lual)										·····
Bu	siness or Resid	lence Add	ress (Num	ber and S	treet, City	, State, Zij	p Code)		-				<u></u> .	
Na	me of Associa	ted Broke	r or Deale	r					······································					
Sta	tes in Which I	erson Lis	ted Has So	olicited or	Intends to	Solicit Pr	ırchasers	- 						
	(Check "All	States" or	check inc	lividual S	ates)					••••••				All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet as necessary.)

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount

	Exchange and already exchanged. Type of Security	Aggregate Offering Price	Э	Amount Already Sold
	Debt	\$		\$
	Equity (Series A Preferred Stock)	\$25,600,000		\$25,600,000
	☐ Common ☒ Preferred			
	Convertible Securities (Debenture convertible into Series A Preferred Stock)	\$ 1,900,000		\$ 1,900,000
	Partnership Interests	\$		\$
	Other (Specify)	\$		\$
	Total	\$27,500,000		\$27,500,000
offer indic	Answer also in Appendix, Column 3, if filing under ULOE. In the number of accredited and non-accredited investors who have purchased securities in this ring and the aggregate dollar amounts of their purchases. For offerings under Rule 504, the number of persons who have purchased securities and the aggregate dollar amount of purchases on the total lines. Enter "0" if answer is "none" or "zero".	Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	102		\$22,934,000
	Non-accredited Investors	33		\$ 4,556,000 \$27,500,000
	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
	Type of offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A			\$
	Rule 504			\$
	Total			\$
	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an			\$
	expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees		\Box	J
				\$
	Transfer Agent's Fees Printing and Engraving Costs			\$ \$ 97,000
	Transfer Agent's Fees			\$
	Transfer Agent's Fees Printing and Engraving Costs Legal Fees			\$ \$ 97,000
	Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees			\$ \$ 97,000 \$
	Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees			\$ \$ 97,000 \$ \$

(Enter the difference between the aggregate offering price given substitute the difference between the aggregate offering price given substitute to the inference is the "adjusted gross proceeds to the issuer."	Question 4.a. This		\$26,407,000
u e e	ndicate below the amount of the adjusted gross proceeds to the issuer sed for each of the purposes shown. If the amount for any purpose is stimate and check the box to the left of the estimate. The total of the qual the adjusted gross proceeds to the issuer set forth in response to	not known, furnish an payments listed must		
a	oove.		Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		\$	_ 🗆 \$
	Purchase of real estate (oil and gas properties)		\$	_ 🛭 \$25,988,000
	Purchase, rental or leasing and installation of machinery and equi	ipment	\$	[] \$
	Construction or leasing of plant buildings and facilities		\$	_ [] \$
	Acquisition of other businesses (including the value of securities offering that may be used in exchange for the assets or securities issuer pursuant to a merger)	of another	S	[] \$
	Repayment if indebtedness		፟ \$419,000	S
	Working capital		□ \$	\$
	Other (specify):		\$	🗆 \$
			<u> </u>	_ 🗆 \$
	Column Totals		፟ \$419,000	፟ \$25,988,000
	Total Payments Listed (column totals added)			\$26,407,000
	D. FEDERAL	SIGNATURE	-	
ignat	suer has duly caused this notice to be signed by the undersigned duly ure constitutes an undertaking by the issuer to furnish to the U.S. Secondation furnished by the issuer to any non-accredited investor pursuant	urities and Exchange Comm	ission, upon written	
	(Print or Type) arrett Corporation	Signature	Date	Soplember 10, 2
	of Signer (Print or Type)	Title of Signer (Print or Ty Chief Financial Officer	pe)	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).